

## UNITED STATES DISTRICT COURT

for the

District of

Division

FILED

NOV - 7 2023

Clerk, U.S. District Court  
Texas EasternChristian Blanchard

Plaintiff(s)

(Write the full name of each plaintiff who is filing this complaint. If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

-v-

Case No.

6:23cv548 JDK/JDL

(to be filled in by the Clerk's Office)

Jury Trial: (check one)

 Yes NoSmith County Jail

Defendant(s)

(Write the full name of each defendant who is being sued. If the names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

## COMPLAINT FOR A CIVIL CASE

## I. The Parties to This Complaint

## A. The Plaintiff(s)

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name

Street Address

City and County

State and Zip Code

Telephone Number

E-mail Address

Christian Blanchard  
516 Woodland Hills Dr.  
Tilton, Smith  
TEXAS 75701  
903-363-1499  
cnb331@gmail.com

## B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. For an individual defendant, include the person's job or title (if known). Attach additional pages if needed.

## Defendant No. 1

Name

Job or Title (*if known*)

Street Address

City and County

State and Zip Code

Telephone Number

E-mail Address (*if known*)Smith County jail206 E. 6th St.Tyler, SmithTXAS 75702903-590-2800

## Defendant No. 2

Name

Job or Title (*if known*)

Street Address

City and County

State and Zip Code

Telephone Number

E-mail Address (*if known*)

## Defendant No. 3

Name

Job or Title (*if known*)

Street Address

City and County

State and Zip Code

Telephone Number

E-mail Address (*if known*)

## Defendant No. 4

Name

Job or Title (*if known*)

Street Address

City and County

State and Zip Code

Telephone Number

E-mail Address (*if known*)

## II. Basis for Jurisdiction

Federal courts are courts of limited jurisdiction (limited power). Generally, only two types of cases can be heard in federal court: cases involving a federal question and cases involving diversity of citizenship of the parties. Under 28 U.S.C. § 1331, a case arising under the United States Constitution or federal laws or treaties is a federal question case. Under 28 U.S.C. § 1332, a case in which a citizen of one State sues a citizen of another State or nation and the amount at stake is more than \$75,000 is a diversity of citizenship case. In a diversity of citizenship case, no defendant may be a citizen of the same State as any plaintiff.

What is the basis for federal court jurisdiction? (check all that apply)

Federal question

Diversity of citizenship

Fill out the paragraphs in this section that apply to this case.

### A. If the Basis for Jurisdiction Is a Federal Question

List the specific federal statutes, federal treaties, and/or provisions of the United States Constitution that are at issue in this case.

8th Amendment, Geneva Convention, ADA

### B. If the Basis for Jurisdiction Is Diversity of Citizenship

#### 1. The Plaintiff(s)

##### a. If the plaintiff is an individual

The plaintiff, (name) Amber Christian Blanchard, is a citizen of the State of (name) Texas.

##### b. If the plaintiff is a corporation

The plaintiff, (name) —, is incorporated under the laws of the State of (name) —, and has its principal place of business in the State of (name) —.

*(If more than one plaintiff is named in the complaint, attach an additional page providing the same information for each additional plaintiff.)*

#### 2. The Defendant(s)

##### a. If the defendant is an individual

The defendant, (name) —, is a citizen of the State of (name) —. Or is a citizen of (foreign nation) —.

- b. If the defendant is a corporation

The defendant, (name) Smith Co. jail, is incorporated under the laws of the State of (name) TEXAS, and has its principal place of business in the State of (name) TEXAS. Or is incorporated under the laws of (foreign nation) —, and has its principal place of business in (name) TYLER, TX.

*(If more than one defendant is named in the complaint, attach an additional page providing the same information for each additional defendant.)*

3. The Amount in Controversy

The amount in controversy—the amount the plaintiff claims the defendant owes or the amount at stake—is more than \$75,000, not counting interest and costs of court, because (explain):

The amount in controversy is \$1,000,000 for pain and suffering, mental anguish, medical bills and court costs

III. Statement of Claim

Write a short and plain statement of the claim. Do not make legal arguments. State as briefly as possible the facts showing that each plaintiff is entitled to the damages or other relief sought. State how each defendant was involved and what each defendant did that caused the plaintiff harm or violated the plaintiff's rights, including the dates and places of that involvement or conduct. If more than one claim is asserted, number each claim and write a short and plain statement of each claim in a separate paragraph. Attach additional pages if needed.

Smith Co. jail violated my ADA repeatedly by not allowing me assistive devices. I feel that I was singled out and targeted because of my disability status. See additional pages

IV. Relief

State briefly and precisely what damages or other relief the plaintiff asks the court to order. Do not make legal arguments. Include any basis for claiming that the wrongs alleged are continuing at the present time. Include the amounts of any actual damages claimed for the acts alleged and the basis for these amounts. Include any punitive or exemplary damages claimed, the amounts, and the reasons you claim you are entitled to actual or punitive money damages.

The wrongs are continuing at this time as I have continued medical bills and treatments including at least one surgery. The costs still remain to be seen. I have ongoing physical and mental anguish due to the actions & negligence of Smith Co. jail.

Defendant Smith County jail is a government organization operating in the Tyler Division of the District of DEB TEXAS. The events giving rise to this Complaint occurred in the Tyler Division of the District of TEXAS.

On or around the end of November, 2021 (I am unaware of the actual dates of the occurrences) and several dates thereafter, I was denied medical care repeatedly for severe injuries

that I sustained while in custody of the Smith County jail. I was also denied the use of a guidance for those incidents. I am disabled as well and was denied needed medications for existing

conditions. I was also denied use of assistive devices ie. a wheelchair or walker which I do use at home. I was given permission by the captain

and the jail's doctor but, was not given my wheelchair by the guards. My wheelchair was taken to the jail with my name on it but, was told repeatedly that it was not there.

<sup>3.</sup> I was also denied food, water, clothing (I was kept naked for an unknown amount of time). I was also denied basic human ~~need~~ needs such as soap, a spoon to eat

<sup>4.</sup> with, a mattress (I was made to sleep on bare metal), toilet paper, etc. I was kept in solitary confinement ~~of~~ on "suicide watch" for approximately 5.5 months.

despite it being known that I was not suicidal. One guard told me it was because I, "didn't answer questions appropriately". I was being kept there because I was

3. cont.

suffering from a psychotic episode caused by a prescription medication I had been taking for seizures I had been taken to jail instead of to hospital and was just

waiting on a bed in a psychiatric facility I "woke up" from this episode at the end of November as I stated before but do not know the dates as I have no

memory of the incident from July 31<sup>st</sup>, 2021 to this time. I do not know what was done to me by the guards before then so, this claim is only for after

the time that I became cognizant again. I woke up in quite a disheveled state with sores all over my lower legs <sup>lungs</sup>(b) lying on a bare piece of rusty metal naked. To me, no

3 cont  
time had passed. Therefore I can't report on dates, etc. because I was not told the date if I asked. Suicide watch does not entail taking everything from a

prisoner. This is considered a human rights violation and against the Geneva Convention

4.

The guards also participated in "white torture" which includes leaving lights on for days at a time, not answering prisoners when they ask the date or time or denying visitation or contact by phone or mail with family/friends. These kinds of acts are also against the Geneva Convention.

pg 5 of 10 (03)

5.

I was also threatened with physical violence while in solitary but, also once I got into the general population so, these were witnesses to that.

6.

I now have severe and most likely permanent injuries due to lack of medical treatment. I injured my left shoulder hitting the floor (which I need assistance

with at home) and need surgery on it now due to lack of timely attention. I fell and broke my nose, it is still to be determined if I suffered a skull fracture

at the time of the fall as I had all of the required signs and symptoms. I now have dizzy spells and an inner ear problem as a result that are debilitating.

Pg 10 of 10 (cb)

I have lost feeling in both of my feet that is still to be determined but is most likely due to frost bite. I also have nerve damage in my hands which is not as

severe. I was unable to take a bowel movement for 23 days and it was unknown by medical staff what to do to treat it. I and my family had to step in

to bring me the appropriate medicine I was forced to remove my own impaction with my hands before this took place. I still have bowel issues from this.

7.

Plaintiff has accumulated significant medical bills so far and the bulk of those bills still remain to be seen. The pain and suffering is severe and constant. The emotional

pp 7 of 10 (CP)

¶ cont.

damag~~l~~ is also severe and ongoing. I was already disabled before all of the new injuries suffered while incarcerated but, if I wasn't I would be now. I cannot seek

employment even though I was working towards that before my arrest. I don't know if I will ever be able to work again.

8/13

Pg 8 of 10 ⑩

CLAIMS FOR RELIEF

FIRST CLAIM FOR RELIEF

(cruel and unusual punishment) 8th Amendment  
to the U.S. Constitution; 42 USC 1983

Plaintiff re-alleges and incorporate Paragraphs 1-7 as if fully set forth here.

8.

Defendants' actions as described above constitute cruel and unusual punishment to Plaintiff's person while in custody awaiting trial. As a direct result of

Defendants' actions, Plaintiff has sustained economic and non-economic damages due to pain, suffering, <sup>CR</sup>humiliation and inconvenience in the amount of \$5,000,000.

---

## V. Certification and Closing

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

### A. For Parties Without an Attorney

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Date of signing: 11/7/23

Signature of Plaintiff

Christian Blanchard

Printed Name of Plaintiff

Christian Blanchard

### B. For Attorneys

Date of signing: \_\_\_\_\_

Signature of Attorney

\_\_\_\_\_

Printed Name of Attorney

\_\_\_\_\_

Bar Number

\_\_\_\_\_

Name of Law Firm

\_\_\_\_\_

Street Address

\_\_\_\_\_

State and Zip Code

\_\_\_\_\_

Telephone Number

\_\_\_\_\_

E-mail Address

\_\_\_\_\_